CLAIM LISTING

1. (Currently Amended) Drain suitable for draining a human or animal antrum, organ or tissue, characterized in that it comprises an elastic biocompatible, biodegradable synthetic thermoplastic non-crosslinked polymer, which polymer has at least one softening point of at most mammalian body temperature and an elastic modulus of up to 120 MPa,

wherein the biodegradable polymer comprises at least one of a polyester, polycarbonate, polyester-carbonate, polyanhydride, polyurethane or polyamide which are optionally combined with polyether groups,

wherein the polyester is a random DL-Lactide- ε-caprolactone copolyester, having a lactide content of 20-75 mol % and

the optional polyether is polyethyleneglycol, polypropyleneglycol, copolymers of polyethyleneglycol and polypropyleneglycol or polytetramethyleneoxide (PTMO).

2. (Previously Presented) Drain according to claim 1, consisting essentially of said synthetic biodegradable polymer.

3. (Previously Presented) Drain according to claim 1, wherein the polymer has at least one softening point (glass transition temperature) of at most 37-°C.

4. (Cancelled)

5. (Cancelled)

6. (Cancelled)

7. (Previously Presented) Drain according to claim 1, wherein the fraction of the L-enantiomer or the D-enantiomer of the lactide is from 65-95 mol.

8. (Withdrawn) Drain according to claim 4, wherein the polyester, polyester-carbonate and/or polyanhydride is a segmented or block copolymer with randomly or alternating segments or blocks and consisting of at least two blocks with different composition.

9. (Withdrawn) Drain according to claim 8, wherein the segments or blocks are phase separated hard and soft segments, characterized by at least two phase transitions, one of them being a glass transition temperature lower than 37-°C, the other a glass transition temperature or melting temperature higher than 37-°C.

10. (Withdrawn) Drain according to claim 8, wherein the segments or blocks forming the low temperature transition phase are composed of pre-polymers of (mixtures of) cyclic or non-cyclic monomers lactide, glycolide, ε-caprolactone, δ-valerolactone, trimethylenecarbonate, tetramethylenecarbonate, 1,5-dioxepane-2-one, para-dioxanone and/or hydroxyalkanoicacid.

11. (Withdrawn) Drains according to claim 8, wherein the copolymer or pre-polymers are obtained by a ring opening polymerization initiated by a diol or di-acid compound.

12. (Withdrawn) Drains according to claim 8, wherein the pre-polymers forming the segments are linked by a difunctional aliphatic compound, preferably a diisocyanate, more preferably 1,4-butanediisocyanate.

13. (Withdrawn) Drain according to claim 9, wherein the segment or block with highest temperature phase transition (hard segment or block) is formed by poly-caprolactone, poly-valerolactone, poly-lactide, poly (lactide-glycolide), poly-*para*-dioxanone, poly (hydroxybutyricacid), polysebacic acid, poly(dodecanedioicanhydride) pre-polymers, and combinations thereof.

14. (Withdrawn) Drain according to claim 4, wherein the biodegradable polymer comprises a polyurethane, which biodegradable polymer is a phase separated copolymer with a polyester, polyester-carbonate and/or polycarbonate soft segment and a urethane hard segment with uniform block length.

15. (Withdrawn) Drain according to claim 14, wherein the polyurethane is formed by diisocyanate linked pre-polymer and diol components having the formula [-A-B-CB-]n, wherein A denotes the pre-polymer moiety, B denotes the diisocyanate moiety, C denotes the diol moiety, having a uniform block length; and n represents an integer larger than 1.

16. (Withdrawn) Drain according to claim 15, wherein the diol component is a linear aliphatic diol (X) with general structure HO-(CH_2)n-OH with n = 2-8 or HO-(CH_2CH_2-O-CH_2CH_2)n-OH with n = 2-8 or the diol (XYX) is a reaction product of two moles of the diol (X) with said diisocyanate.

17. (Withdrawn) Drain according to claim 15, wherein the diisocyanate is 1,4-butanediisocyanate.

18. (Withdrawn) Drain according to claim 15, wherein the pre-polymer is formed by ring opening polymerization initiated by a diol or polyethyleneglycol compound of the cyclic monomers lactide, glycolide, ε-caprolactone, δ-valerolactone, trimethylenecarbonate, tetramethylenecarbonate, 1,5-dioxepane-2-one and/or para-dioxanone.

19. (Withdrawn) Drain according to claim 14, wherein the polyester is a poly(DL-lactide-ε-caprolactone) and the diol compound is the reaction product of two moles of 1,4-butanediol and one mole of 1,4-butanediisocyanate.

20. (Withdrawn) Drain according to claim 14, wherein the polyester is a poly(DL-lactide-ε--caprolactone) and the diol compound is the reaction product of two moles of diethyleneglycol and one mole of l,4-butanediisocyanate.

21. (Withdrawn) Drain according to claim 14, wherein the soft segment is a combination of a pre-polymer with a polyether pre-polymer, preferably a polyethyleneglycol.

22. (Withdrawn) Drain according to claim 21 wherein the polyethyleneglycol has a molecular weight of 1500.

23. (Withdrawn) Drain according to claim 14, wherein the polyurethane contains 1-25 wt.% polyethyleneglycol, preferably 5-15%, being present as a pre-polymer initiator, and the polyester is a poly(DL-lactide-ε-caprolactone) and the diol compound is the reaction product of two moles of 1,4-butanediol and one mole of 1,4-butanediisocyanate.

24. (Withdrawn) Drain according to claim 23, wherein the polyethyleneglycol has a molecular weight of 1000.

25. (Withdrawn) Drain according to claim 1, wherein the polymer comprises a polyurethane and a polyester, polyestercarbonate or a polycarbonate, obtainable by solution blending.

26. (Withdrawn) Drain according to claim 25, wherein the polyurethane is based on a DL-lactide-ε-caprolactone soft segment pre-polymer and the polyester is a poly(DLlactide-ε-caprolactone) copolymer.

27. (Previously Presented) Drain according to claim 1, wherein said polymer is loaded with radiopaque fillers or pharmaceutical components comprising antibiotics, anti-inflammatory agents, peptides and proteins.

28. (Previously Presented) Drain according to claim 1, which is provided with perforations.

29. (Currently Amended) Nasal drain comprising an elastic biocompatible, biodegradable synthetic thermoplastic non-crosslinked polymer, which polymer has at least one softening point of at most mammalian body temperature and an elastic modulus of up to 120 MPa,

wherein the biodegradable polymer comprises at least one of a polyester, polycarbonate, polyester-carbonate, polyanhydride, polyurethane or polyamide which are optionally combined with polyether groups,

wherein the polyester is a random DL-Lactide- ε-caprolactone copolyester, having a lactide content of 20-75 mol % and

the optional polyether is polyethyleneglycol, polypropyleneglycol, copolymers of polyethyleneglycol and polypropyleneglycol or polytetramethyleneoxide (PTMO).

30. (Previously Presented) Drain, being a nasal drain, according to claim 1, having a wall thickness of 0.05-5.0 mm.

31. (Previously Presented) Drain according to claim 1, having a total length of 3-300 mm.

32. (Previously Presented) Drain according to claim 1, having an outer diameter of 0.5-50 mm.

33. (Previously Presented) Drain according to claim 1, comprising a funnel shaped element on at least one end.

34. (Previously Presented) Drain according to claim 33, having a funnel length of 2-20 mm and a funnel diameter of 3-30 mm.

35. (Previously Presented) Drain according to claim 1, which is obtainable by dip-coating or spray coating of a polymer solution on a mandrel or extrusion of a polymer.

36. (Withdrawn) Use of a drain according to claim 21 used for performing coloanal anastomosis.

37. (Previously Presented) Method for treating a disorder associated with dysfunction of natural drainage of body fluids from an antrum, organ or tissue comprising introducing a drain

according to claim 1 in said antrum, organ or tissue, such that said antrum, organ or tissue is connected with the environment or another location within the body, after which said drain degrades over time and degradation products of said drain are cleared through the digestive channel or said antrum, organ or tissue or absorbed and subsequently metabolized or secreted by the body.

38. (Original) Method according to claim 37, wherein said disorder is selected from (chronic) sinusitis, inflammation of the middle ear, liver disorders, disorders of the gastro-intestinal tract, tear duct disorder, surgical wound drainage, and thoracic disorder.

39. (Previously Presented) Method according to claim 37, wherein said drain is introduced in said antrum using at least one of a form of attachment selected from the group consisting of sealant, suture, and staple.

40. (Cancelled)

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